

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005455

FILED  
Jul 08, 2005  
Secretary of State

Entity Name: AT RISK YOUTH GROUP HOMES, INC.

**Current Principal Place of Business:**

7530 NW 10 AVENUE  
MIAMI, FL 33150

**New Principal Place of Business:**

**Current Mailing Address:**

7530 NW 10 AVENUE  
MIAMI, FL 33150

**New Mailing Address:**

FEI Number: 51-0472565      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: GACHELIN, FLEURANT  
Address: 7530 NW 10 AVENUE  
City-St-Zip: MIAMI, FL 33150

Title: V ( ) Delete  
Name: BIENAIME, STANLEY  
Address: 7530 NW 10 AVENUE  
City-St-Zip: MIAMI, FL 33150

Title: SD ( ) Delete  
Name: DESROSIER, BERNADETTE  
Address: 7530 NW 10 AVENUE  
City-St-Zip: MIAMI, FL 33150

Title: TD ( ) Delete  
Name: GACHELIN, MAGDALA  
Address: 7530 NW 10 AVENUE  
City-St-Zip: MIAMI, FL 33150

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FLEURANT GACHELIN

PD

07/08/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date